

**REMARKS**

This amendment is in response to the Office Action of March 2, 2007 (hereinafter Office Action). The amendment is filed along with a Petition for a three-month Retroactive Extension of Time. The US Patent Office is expressly authorized to charge all fees due to Deposit Account No. 50-0951.

In the Office Action, Claim 8 was objected to. Claims 1-3, 5, 14-16, 18, and 38-45 were rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent 5,774,671 to Satoh (hereinafter Satoh) in view of U.S. Patent 5,832,447 to Rieker, *et al.* (hereinafter Rieker). Claims 7 and 20 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Satoh in view of Rieker, and further in view of U.S. Patent 5,675,637 to Szlam, *et al.* (hereinafter Szlam). Claims 6 and 19 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Satoh in view of Rieker, and further in view of U.S. Patent 6,349,299 to Spencer (hereinafter Spencer). Claims 9-13 were rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent 4,876,643 to McNeill (hereinafter McNeill) in view of Rieker. Claims 8 and 21 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Satoh in view of Spencer, Szlam, and Rieker. Claims 22-28 and 30-36 were rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent 5,070,452 to Doyle, Jr., *et al.* (hereinafter Doyle) in view of Rieker. Claims 29 and 37 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Doyle and Rieker, in view of U.S. Patent 6,694,362 to Secor (hereinafter Secor).

Although Applicant respectfully disagrees with the rejections, Applicant nonetheless has amended independent Claims 1, 8, 9, 14, 21, 22, 30, 41, and 45 so as to expedite prosecution of the present application by further emphasizing certain aspects of the invention. Applicant respectfully notes, however, that such amendments are not intended as, and should not be interpreted as, the surrender of any subject matter. Accordingly, Applicant respectfully reserves the right to present the original version of any of the amended claims in any future divisional or continuation applications from the

present application. Each of the amendments is fully supported throughout the Specification. No new matter has been introduced by virtue of these amendments.

**Claims 1, 8, 9, 14, 21, 22, 30, 41, and 45, As Amended,**

**Define Over The Cited References**

Independent Claims 1, 8, 9, 14, 21, 22, 30, 41, and 45, as amended, each recite distinct forms of iterative database searching, all involving the automatic, computer-implemented generation of different character strings of the same data items that are used as the basis of searching different electronic databases. Initially, Applicants note that at page 3 of the Office Action is acknowledged that Satoh fails to teach or suggest this feature as recited in the claims. Applicants respectfully submit that none of the other references teach or suggest this feature, though at pages 3-4 of the Office Action Rieker is cited as teaching or suggesting just such a feature.

Rieker is directed to an automated system and method for providing "real-time verification of health insurance eligibility." (Rieker, Col. 2, lines 55-66; see also Abstract, lines 1-4.) Specifically, it is stated in the Office Action that

"Rieker teaches at block 256 where requesting insurance eligibility verification is performed using a patient's name or if the patient is a minor using additional information such as the name of a responsible party (parent's name) (see: column 8, lines 50-61). Additionally, Rieker teaches at control process (174, 7F) information is checked by comparing the format of received message containing eligibility information against format standards for the particular gateway (116, Fig. 2) (transfer agent) and assuming all information is correct the control process (174, Fig. 7F) generates a response (see: column 11, lines 65 to column 12, lines 5 and column 10, lines 56-58). In addition, Rieker teaches that at block 350 the

control process 174 matches insurance eligibility information from the appropriate data in gateway (116, Fig. 2) with patient-specific information and if there is an error such that the information does not match the process is returned to block 252 (see: column 11, lines 52-58)." (Office Action, pages 4-5.) (Emphasis supplied.)

In the portion of the reference quoted, Rieker provides the following description of a search for "patient response data" in order to match "insurance eligibility information:"

"[T]he control process 174 next reads the transaction response file (block 348), and matches specific patient response data with request data (block 350). The structure of the transaction response file will depend on the network in which the system operates. Thus, block 350 matches insurance eligibility information obtained from the appropriate data in gateway 116 with patient-specific information stored within the transaction request table 400. If there is an error such that the information does not match (decision block 352), request flags are set to indicate an error (block 354), and control returns to FIG. 7A block 252. If there is no error ("no" exit to decision block 352), then control process 174 checks the transaction response file for errors against specific standards relating to the particular payor network (block 356). Once again, if there is an error detected in the received response, an error flag is set and control returns to another part of the control process 174 (decision block 358, block 354). Additional errors are checked for by comparing the format of the received response message against format standards for the particular data gateway 116 (block 360), and any errors generate an error indication (block 362, block 354)." (Rieker, Col. 11, lines 48-65.) (Emphasis supplied.)

Applicants respectfully submit, however, that Rieker's setting of an "error flag" when search information does not match stored data is not at all similar to Applicants' invention. To fully appreciate the difference, it is necessary to consider the procedure Rieker follows when the error flag is set so that "control returns to another part of the control process 174 (decision block 358, block 354)." This procedure is described in Rieker as follows:

"If the billing number of the newly received admissions transaction matches the billing number in the transaction request table ("yes" exit to decision block 266), then control routine 174 compares the new request with the previous request (by referencing more complete information about past requests that may be stored on mass storage device 172) (block 268). If the new request data is identical to previous requested information ("yes" exit to decision block 270), then no eligibility verification is necessary (eligibility has already been recently determined) and control returns to block 252 shown in FIG. 7A (block 272). If the new request is not identical to the prior requested data ("no" exit to decision block 270), then the transaction request table is updated with the new data and certain request flags are set to request the communications process 176 to generate an eligibility request (block 274). If the new billing number does not match the billing number in the transaction request table ("no" exit of decision block 266), then request information is added to a transaction request table so that a new request will be generated by communications process 176 (block 276). (Rieker, Col. 9, lines 22-43.) (Emphasis supplied.)

As explicitly described, Rieker responds to a failure to find a match by adding new data items to the search information. The list of different data items that Rieker considers is extensive. (See Col. 9, line 48 – Col. 10, line 13.)

Rieker's repeated searching by successively adding new and different data items in response to a failure to find a match is wholly distinct from Applicant's invention. With Applicant's invention, a failure to find a match results in a new search, but one that uses the same data item or items. Because each data item comprises a character string, however, Applicant's subsequent search involves automatically generating new combinations or permutations of the character strings representing the same data item, as recited in Claims 1, 8, 9, 14, 21, 22, 30, 41, and 45.

One benefit of Applicants' invention is that it addresses the problems that can arise when stored data items being searched were initially entered erroneously or when different character strings are used for the same data item (e.g., using the name "Jim" in place of "James"). By automatically generating different combinations or permutations of the character string representing the same data item, Applicant's invention can repeat a search using alternate character strings in an attempt to obtain a match. Rieker's procedure of adding additional, different data items is an approach that is entirely different from Applicant's. Rieker nowhere even suggests repeating a search using only the same data items, let alone the same items represented by a different combination or permutation of the character string.

Accordingly, neither Rieker nor any of the cited references teaches or suggests every feature recited in independent Claims 1, 8, 9, 14, 21, 22, 30, 41, and 45. Applicants respectfully submit, therefore, that Claims 1, 8, 9, 14, 21, 22, 30, 41, and 45 each define over the prior art. Applicants further respectfully submit that whereas each of the remaining dependent claims depends from Claim 1, 8, 9, 14, 21, 22, 30, 41, or 45 while recited additional features, the dependent claims likewise define over the prior art.

**Claim 40 Defines Over The Cited References**

The remaining independent claim, Claim 40, recites the feature of electronically searching different network-connected databases in order to determine the "creditworthiness" of a medical consumer. Specifically, the claim recites that the medical consumer's creditworthiness is determined based upon credit information retrieved from one or more different network locations and that the step includes searching credit information specific to a verified identity of the consumer, the credit information being stored at one or more of the different network locations.

In the Office Action, it is stated that Rieker teaches that the consideration of real-time insurance eligibility information "allows" a healthcare provider to "ask a patient about alternate insurance/payment ability" if insurance eligibility is not verified. (Office Action, page 11.) In the portion of Rieker cited in the Office Action, the reference explicitly describes this approach:

"Real-time insurance eligibility information allows health care provider to ask patient about alternate insurance/payment ability if asserted insurance eligibility is not verified." (Col. 4, lines 45-48.)

Applicant respectfully points out, however, that directly asking the medical consumer himself or herself about alternate payment capabilities is not at all similar to electronically searching different databases. Asking the medical consumer for such information is not comparable to independently searching various electronic databases independently of any information provided by the medical consumer himself or herself.

The stark differences between these different approaches is highlighted, for example, by the fact that when the consumer is asked directly about payment wherewithal, the information requester must rely strictly on the veracity of the

consumer. If one simply asks the consumer, as described by Rieker, there is no opportunity to make an independent determination of the consumer's creditworthiness.

Asking a consumer about alternate payment capabilities does not even remotely suggest electronically searching databases at different network locations. It likewise does not suggest retrieving credit information from one or more of the different network locations. Certainly, asking the consumer about alternate payment capabilities is not at all comparable to searching credit information specific to a verified identity of the consumer, where the credit information is stored at one or more of the different network locations, as explicitly recited in Claim 40.

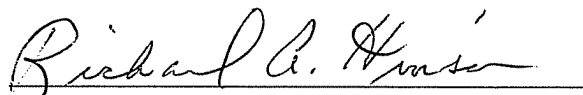
Accordingly, neither Rieker nor any of the other cited references teach or suggest every feature recited in Claim 40. Applicant, therefore, respectfully submits that Claim 40 defines over the prior art.

### CONCLUSION

Applicants believe that this application is now in full condition for allowance, which action is respectfully requested. Applicants request that the Examiner call the undersigned if clarification is needed on any matter within this response, or if the Examiner believes a telephone interview would expedite the prosecution of the subject application to completion.

Respectfully submitted,

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